

ISSUE SLIP S

(Cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		48	5/2/01
FORMALITY REVIEW	H.S.	466	05-21-01
RESPONSE FORMALITY REVIEW	MD	2097	09/19/01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral).... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	1	1	
2	3	1	
3	4	1	
4	5	1	
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43	45	1	
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46	48	1	
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48	50	1	

Claim	Final	Original	Date
51	11	1	
52	11	1	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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AL
5/22
52-11
29-19-01